

Public Health in Washington State

Performance Management Glossary

This Glossary has been compiled to assist local and state public health staff, as well as leadership and governance entities, in their work on performance management of the public health enterprise or “system”. This important work will be more effective if there is shared understanding of these words and concepts.

The Glossary is organized by listing key words alphabetically and grouping related concepts under key words (for example, under Community/Community Involvement there are a series of definitions, grouped conceptually). An Index, at the back of the document, references the location of specific words.

The source(s) for the definitions are provided. Bracketed comments [] further clarify sourced definitions and/or crosswalk to related key words (always italicized) in the Glossary or related Performance Management documents. Throughout, organizations or agencies are referred to interchangeably, depending on the source. Organizations/agencies are both public and private.

Annual

Evidence that action or activity has occurred within the last 14 months by dated documentation or policy statement of frequency of activity. [12 months plus 2 months grace period]

National Committee for Quality Assurance (NCQA)

Assessment

Collecting, analyzing, and using data to educate and mobilize communities, develop priorities, garner resources, and plan actions to improve public health.

Assessment in Action: Improving Community Health Assessment Practice, Clegg and Associates, 2003.

Community / Community Involvement (and related concepts)

Community is a group of people who have common characteristics: communities can be defined by location, race, ethnicity, age, occupation, interest in particular problems or outcomes, or other common bonds. Ideally, there should be available assets and resources, as well as collective discussion, decision-making and action. [It is assumed that the assets and resources will be available to the community to support collective action.]

Turnock, B. *Public Health: What It Is and How It Works*, Aspen Publishers, 2001

Public is relating to, or affecting all the people or the whole area of a nation or state; relating to, or being in the service of the community or nation; or, devoted to the general or national welfare

Merriam Webster Dictionary

Partners fully share risks, responsibilities, resources, and rewards in collaborative efforts. They establish mutually respectful, trusting relationships, take the time to understand each other’s motivations and hoped for accomplishments, and define and address challenges in a manner that provides opportunities for all partners to share in their solutions.

Himmelman, A, *Collaboration For A Change*, Himmelman Consulting, 2004

Stakeholders are all persons, agencies and organizations with

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an investment or “stake” in the health of the community and the local public health system. This broad definition includes persons and organizations that benefit and/or participate in the delivery of services that promote the public’s health and overall well-being. [Partners are included in stakeholders.]

Performance Standards, Centers for Disease Control and Prevention, 2004

Cooperation is characterized by informal relationships that exist without any commonly defined mission, structure or planning effort. Information is shared as needed, and authority is retained by each organization so there is virtually no risk. Resources are separate as are rewards.

Collaboration: What makes it work, Amherst G. Wilder Foundation, 1998

Coordination is characterized by more formal relationships and understanding of compatible missions. Some planning and division of roles are required, and communication channels are established. Authority still rests with the individual organizations, but there is some increased risk to all participants. Resources are available to participants and rewards are mutually acknowledged.

Collaboration: What makes it work, Amherst G. Wilder Foundation, 1998

Collaboration is a mutually beneficial and well-defined relationship entered into by two or more organizations to achieve common goals. The relationship includes a commitment to mutual relationships and goals; a jointly developed structure and shared responsibility; mutual authority and accountability for success; and sharing of resources and rewards.

Collaboration: What makes it work, Amherst G. Wilder Foundation, 1998

Community Development is defined as

1. a group of people
2. in a community
3. reaching a decision
4. to initiate a social action process
5. to change their economic, social, cultural or environmental situation [or health]

Christensen, J, Robinson, J, *Community development in America*, Iowa State University Press, 1980

Capacity-building is a strategy to increase the ability of community, neighborhood, and constituency-based organizations to prioritize issues and secure resources relevant for addressing challenges defined and determined by those organizations.

Himmelman, A, *Collaboration For A Change*, Himmelman Consulting, 2004

Compliance

Compliance is defined as conformity in fulfilling official requirements.

Merriam-Webster

Critical Health Services

Health services and health conditions or risks for which appropriate services—screening, education and counseling, or interventions—are needed. [See Appendix A for a detailed listing of the *Critical Health Services*. See the full report on the SBOH website for a discussion of the evidence-based process for developing the list:

<http://www.doh.wa.gov/SBOH/Priorities/Access/access.htm>]

Final Report on Access to Critical Health Services, State Board of Health, 2001.

Current and/or “Up to Date”

For policies and procedures, *current* requires evidence of review and/or revision within the last two years. For reports or performance audits, the requirement is the most recent data available within the last three years. [Note that this definition is intended to apply to the currency of documents under review, not clinical procedures.]

NCQA

Customer Service

Customer service is defined as providing customers with goods and services that meet their expectations and needs at a price they are willing to pay. [Note that price=cost, which include convenience and time as well as a dollar amount.]

Gitlow, H.S and S.J., *The Deming Guide to Quality and Competitive Position*, Prentice Hall, 1987

Evidence-based Practices (and related concepts)

Evidence-based practices (interventions) are the systematic selection, implementation, and evaluation of strategies, programs and policies with evidence from the scientific literature that they have demonstrated effectiveness in accomplishing intended outcomes.

American Journal of Health Education, 2001

Evidence-based *practices* are skills, techniques, and strategies that can be used by a practitioner. Evidence-based *programs* consist of collections of practices that are done within known parameters (philosophy, values, service delivery structure, and treatment components) and with accountability to the consumers and funders of those practices.

Implementation Research: A Synthesis of the Literature, University of South Florida, 2005

Best practices are the best clinical or administrative practice or approach at the moment, given the situation, the consumer's or family's needs and desires, the evidence about what works for this situation/need/desire, and the resources available.

Turning Knowledge into Practice, ACMHA, 2003

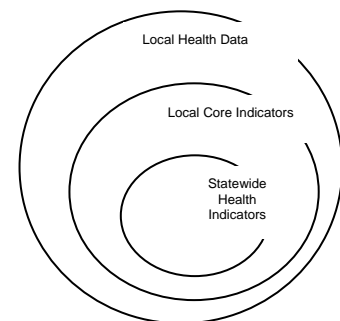
Promising practices are clinical or administrative practices for which there is considerable evidence or expert consensus and which show promise in improving client outcomes, but which are not yet proven by the highest or strongest scientific evidence.

Turning Knowledge into Practice, ACMHA, 2003

Health Data (and related concepts)

Health data include community health status (gathered through birth and death certificates, hospital discharge diagnoses, statewide and local surveys, other epidemiologic sources), communicable disease (food/water/air/waste/vector borne) environmental health risks, presence of and use of healthcare facilities and providers, preventive services, and other information identified by the community as helpful for planning. [See also *Performance Management and Program Planning and Evaluation*]

Core indicators are a subset of health data. They are data sets that are tracked over time and reported publicly, and include selected health status information, communicable disease and



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environmental health risks and related illnesses. [*Program Evaluation* data may contribute to this data set.]

Statewide Health indicators are a subset of local or statewide health data and local or statewide core indicators. They are those data sets that have been selected for use statewide, to be reported by DOH on a consistent basis for all LHJs as well as statewide. Whenever possible, they are accompanied by benchmark data from other LHJs, other states, and/or national data. [*Program Evaluation* data may contribute to this data set.]

Quantitative data are measurement variables or data that can be measured and represented on a numerical scale, such as number of services, annual revenue, and number of employees.

Mendenhall, William; *Statistics for Management and Economics*; 1978

Quantitative analysis is an analysis of findings that must include a first-level, quantitative data analysis that incorporates aggregate results and trends over time. The analysis must include a comparison of results against a standard or goal, if one was set.

2004 MCO Standards and Guidelines, NCQA, 2003

Qualitative data are attribute variables or data that cannot be measured and are not necessarily represented in numerical form, such as results from focus groups or interviews with individuals.

Mendenhall, William; *Statistics for Management and Economics*; 1978

Qualitative analysis is a root cause analysis or barrier analysis to identify the reasons for the results. [Includes non-numerical analytic tools such as fishbone diagrams.] This is especially important when results do not meet the goal set by the organization. [Results being the *Quantitative Analysis* described above.]

2004 MCO Standards and Guidelines, NCQA, 2003

Gap analysis is the assessment of the gap between stated goals and current reality. If there were no gap, there would be no need for any action to move toward goals.

Senge, Peter, *The Fifth Discipline*, Doubleday, 1990

Health Disparities

Health Disparities refer to differences in populations' health status that are avoidable and can be changed. These differences can result from social and/or economic conditions, as well as public policy. These and other factors adversely affect population health.

Operational Definition of a Functional Local Health Department. NACCHO, November 2005.

Internal Audit

The process of reviewing a sample of case write-ups or case files completed by individuals conducting investigation or compliance activities, to determine if the activity is being done in a timely, accurate and comprehensive manner and follows established protocols or procedures. For example, on an annual basis, the documented review of 30 write-ups of communicable disease investigations or food establishment inspections for a specific staff person. The review should

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include performance on specific requirements and identification of activities needing improvement, if any.

Meaningful Improvement in Public Health (and related concepts)

Quality refers to the appropriateness of performed public health services and other organizational activities in relation to their stated goals and standards of practice. It focuses on the process of service delivery and department functioning.

Effectiveness is the extent to which a public health service, activity, or intervention achieves its intended effect. The effectiveness domain focuses on the outcomes of services and department functioning.

Efficiency is the ratio of the amount of resources consumers (inputs such as staff hours, administrative costs, supplies, etc) to the client outcomes observed or the quantity of services performed. As such, efficiency may be measured relative to aspects of quality (i.e., to health services performed) or relative to effectiveness (i.e., to health benefits produced)

Accessibility is the extent to which a public health service is readily available to the community's individuals in need. The accessibility domain refers to the capacity of the agency to provide service in such a way as to reflect and honor the social and cultural characteristics of the community and focuses on agency efforts to reduce barriers to service utilization. [Includes physical accessibility.]

Reedy AM, Luna RG, Olivas GS and Sujeer A. *Local Public Health Performance Measurement: Implementation Strategies and Lessons Learned From Aligning Program Evaluation Indicators with the 10 Essential Public Health Services*. Journal of Public Health Management Practice, 2005 11(4) 317-325.

Medical Home

A *medical home* is not a building, house, or hospital, but rather an approach to providing comprehensive primary care. A *medical home* is defined as primary care that is accessible, continuous, comprehensive, family centered, coordinated, compassionate, and culturally effective

American Academy of Pediatrics, <http://www.medicalhomeinfo.org/>

Monitoring

Monitoring is used in the *Standards for Public Health in Washington State* as a more public-friendly way of describing public health surveillance activity.

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Surveillance is systematic monitoring of the health status of a population.

Turnock, B. *Public Health: What It Is and How It Works*, Aspen Publishers, 2001

Performance Management / Measurement (and related concepts)

Performance measure is the specific quantitative representation of capacity, process, or outcome deemed relevant to the assessment of performance. [See also Government Management, Accountability, and Performance (GMAP) and *Program Planning and Evaluation*.]

Lichiello, P. *Turning Point Guidebook for Performance Measurement*, Turning Point National Program Office, December 1999.

Performance measurement is the regular collection and reporting of data to track work produced and results achieved. Performance measurement analyzes the success of an organization's efforts by comparing data on what actually

happened to what was planned or intended. [See also *Program Planning and Evaluation and Quality Improvement*]

Performance management is the use of performance measurement information to help set agreed-upon performance goals, allocate and prioritize resources, inform managers to either confirm or change current policy or program directions to meet those goals, and report on the success in meeting those goals. [See also *Program Planning and Evaluation, Strategic Planning, and Quality Improvement* in this Glossary as well as the *Performance Management Maps*.]

Policy Development

Policy development contributes to the development of formal policies (e.g., legislation, regulations, and ordinances, [budget]) and informal policies (e.g., worksite, community and family norms that support healthy communities.) Includes policy implementation, evaluation, and community mobilization.

Spokane Regional Health District

Prevention (and related concepts)

Primary Prevention consists of strategies that seek to prevent the occurrence of disease or injury, generally through reducing exposure or risk factor levels. These strategies can reduce or eliminate causative risk factors (risk reduction). [Also referred to as Universal Prevention.]

Turnock, B. *Public Health: What It Is and How It Works*, Aspen Publishers, 2001

Secondary Prevention consists of strategies that seek to identify and control disease processes in their early stages before signs and symptoms develop (screening and treatment). [Also Referred to as Selective Prevention.]

Turnock, B. *Public Health: What It Is and How It Works*, Aspen Publishers, 2001

Tertiary Prevention consists of strategies that prevent disability by restoring individuals to their optimal level of functioning after a disease or injury is established and damage is done. [Also referred to as Indicated Prevention.]

Turnock, B. *Public Health: What It Is and How It Works*, Aspen Publishers, 2001

Health Promotion is an intervention strategy that seeks to eliminate or reduce exposures to harmful factors by modifying human behaviors. Any combination of health education and related organizational, political, and economic interventions designed to facilitate behavioral and environmental adaptations that will improve or protect health. This process enables individuals and communities to control and improve their own health. Health promotion approaches provide opportunities for people to identify problems, develop solutions, and work in partnerships that build on existing skills and strengths. [Most often used as a *Primary Prevention* strategy.]

Turnock, B. *Public Health: What It Is and How It Works*, Aspen Publishers, 2001

Health Education is any combination of learning opportunities designed to facilitate voluntary adaptations of behavior (in individuals, groups, or communities) conducive

Turnock, B. *Public Health: What It Is and How It Works*, Aspen Publishers, 2001

to good health. Health education encourages positive health behavior. [May be used for *Primary*, *Secondary*, and *Tertiary Prevention* as well as being a tool for *Health Promotion*.]

Program (and related concepts)

For the purpose of *Performance Management*, *Program* is used broadly to refer to any activity that is provided or overseen by the state or local public health entity in support of the mission of *Public Health*.

Program is a coherent set of clearly described activities and specified linkages among activities designed to produce a set of desired outcomes.

Implementation Research: A Synthesis of the Literature, University of South Florida, 2005

Activities are specific interventions and related services that are intended to change outcomes. [May also be called strategies; these are programmatic strategies as distinct from organizational strategies, as defined in *Strategic Planning*.]

Organizational Research Services

Program is used to identify the unit of analysis or the target of evaluation. It encompasses the wide variety of services a department provides, including direct services, community mobilization, policy development, laboratory services, enforcement activities, and [or] any other activities that have distinct goals and objectives and are implemented to accomplish the mission of the department.

Reedy AM, Luna RG, Olivas GS and Sujeer A. *Local Public Health Performance Measurement*:

Program Planning and Evaluation (and related concepts)

See also *Strategic Planning* and *Quality Improvement*. Generally, *Strategic Planning* and *Quality Improvement* occur at the level of the overall organization, while *Program Planning and Evaluation* are program specific activities that feed into the *Strategic Plan* and into *Quality Improvement*. *Program Evaluation* alone does not equate with *Quality Improvement* unless program evaluation data are used to design program improvements and to measure the results of the improvements as implemented.

The *Strategic Plan* focuses on a range of organizational goals, strategies and objectives including new initiatives, while the *Quality Plan* identifies specific areas of current operational performance for improvement.

Definitions below are from the program planning and evaluation approach and from the logic model approach. The bracketed comments describe the relationships between these two program development methods, both commonly in use in public health.

Program evaluation is defined as the systematic application of social [or scientific] research procedures for assessing the conceptualization, design, implementation, and utility of social [community] intervention programs.

Rossi PH, Freeman HE, Lipsey MW. *Evaluation: A Systematic Approach*. 6th ed. Sage; 1999.

Goals are general statements expressing a program's aspirations or intended effect on one or more health problems, often stated without time limits

Turnock, B. *Public Health: What It Is and How It Works*, Aspen Publishers, 2001

Objectives are targets for achievement through interventions.

Turnock, B. *Public Health: What*

Objectives are time-limited and measurable in all cases. Various levels of objectives for an intervention include outcome, impact and process objectives.

It Is and How It Works, Aspen Publishers, 2001

Outcomes [program planning approach] are sometimes referred to as results of the health system; these are indicators of health status, risk reduction, and quality-of-life enhancement. Outcomes are long-term objectives that define optimal, measurable future levels of health status; maximum acceptable levels of disease, injury, or dysfunction; or prevalence of risk factors. [Note also the way in which outcomes are defined by the *Logic Model* and the bracketed comments relating the two planning methods and their use of terms.]

Turnock, B. *Public Health: What It Is and How It Works*, Aspen Publishers, 2001

Logic model is a systematic and visual way to present and share an understanding of the relationships among the resources available to operate a program, the activities planned, and the changes or results expected to be achieved.

Logic Model Development Guide, W.K. Kellogg Foundation, 2004

Outputs are data about activities. They are the direct results of program activities, usually described in terms of size and scope of the services or products delivered or produced by the program. They indicate whether or not a program was delivered to the intended audiences at the intended “dose”. A program output, for example, might include the number of classes taught, meetings held, materials distributed, program participation rates, or total service delivery hours. [In program planning terms, the *Outputs* are process *Objectives* and their *Performance Measures*.]

Logic Model Development Guide, W.K. Kellogg Foundation, 2004

Outcomes [logic model approach] are the specific changes in program participants’ [or populations, communities, organizations, systems] behavior, knowledge, skills, status and level of functioning. Short-term outcomes should be attainable within 1-3 years, while longer-term outcomes should be achievable within a 4-6 year timeframe. [In program planning terms, the *Outcomes* are either outcome or impact *Objectives* and their *Performance Measures* (also referred to generically as *Outcomes*).]

Logic Model Development Guide, W.K. Kellogg Foundation, 2004

Indicators are specific measurable and observable changes that can be “seen, heard or read” to demonstrate that an outcome is being met. [Note that there is overlapping usage among *Indicators*, *Outcomes*, *Outputs*, and *Performance Measures*.]

Organizational Research Services

Impact is the fundamental intended or unintended change occurring in organizations, communities or systems as a result of program activities within 7-10 years. [In program planning terms, the *Impact* is the *Goal* of the program.]

Logic Model Development Guide, W.K. Kellogg Foundation, 2004

Provider

Provider describes people and/or institutions that give health

O’Connor, Kathleen, *The*

care services and includes ... any formal health care giver

Language of Health Care Reform, Understanding Business Press, 1994

Protocol

A written description of the step-by-step actions and decisions an individual or organization must complete in performing a specific activity or service.

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Public Health

Public Health includes the activities that society undertakes to assure the conditions in which people can be healthy. These include organized community efforts to prevent, identify and counter threats to the health of the public.

Turnock, B. *Public Health: What It Is and How It Works*, Aspen Publishers, 2001

The Three Core Functions and Ten Essential Services of Public Health

Assessment

1. Monitor health status of the community
2. Diagnose and investigate health problems and hazards
3. Inform and educate people about health issues

Policy Development

4. Mobilize partnerships to solve community problems
5. Support policies and plans to achieve health goals

Assurance

6. Enforce laws and regulations to achieve health goals
7. Link people to needed personal health services
8. Ensure a skilled public health workforce
9. Evaluate effectiveness, accessibility, and quality of health services
10. Research and apply innovative solutions

Institute of Medicine, *The Future of Public Health*, 1988.
Public Health Functions Steering Committee, 1994.

Quality Improvement (and related concepts)

See also *Strategic Planning* and *Program Planning and Evaluation*. Generally, *Strategic Planning* and *Quality Improvement* occur at the level of the overall organization, while *Program Planning and Evaluation* are program specific activities that feed into the *Strategic Plan* and into *Quality Improvement*. *Program Evaluation* alone does not equate with *Quality Improvement* unless program evaluation data are used to design program improvements and to measure the results of the improvements as implemented.

The *Strategic Plan* focuses on a range of organizational goals, strategies and objectives including new initiatives, while the *Quality Plan* identifies specific areas of current operational performance for improvement.

Quality improvement (QI) is an integrative process that links knowledge, structures, processes and outcomes to enhance quality throughout an organization. The intent is to improve the level of performance of key processes and outcomes within an organization.

Standards for Accreditation of Managed Behavioral Healthcare Organizations. National Committee for Quality Assurance.

Quality Plan is a written description of QI activities that has been approved by the governing body and includes an annual plan that describes with timelines, the specific planned activities to be carried out. It should be broad in scope, reflecting a range of health and service issues relevant to the population served.

Standards for Accreditation of Managed Behavioral Healthcare Organizations. National Committee for Quality Assurance.

Quality methods build on an assessment component in which a group of selected indicators [selected by an agency] are regularly tracked and reported. The data should be regularly analyzed through the use of control charts and comparison charts. The indicators show whether or not agency goals and objectives are being achieved and can be used to identify opportunities for improvement. Once selected for improvement, the agency develops and implements interventions, and remeasures to determine if interventions were effective. [These quality methods are frequently summarized at a high level as the Plan/Do/Check/Act (PDCA) or Shewhart Cycle.]

Joint Commission on the Accreditation of Healthcare Organizations (JCAHO), NCQA

Risk Communication

Risk communication is a science-based approach for communicating effectively with the public in high concern and high stress situations. Common situations regarding scientifically proven risk communication techniques involve public health and safety issues, environmental initiatives, crisis communication and emergency management, product safety, organizational change, litigation, land use and facility siting proposals.

Covello, Vincent, *What is Risk Communication and When is it Necessary?*, Guild Communications, 2002

Standards for Public Health in Washington State

The *Standards* cover key aspects of public health, selected because they represent protection that should be in place everywhere:

- Understanding health issues
- Protecting people from disease
- Assuring a safe, healthy environment for people
- Responding to public health emergencies
- Promoting healthy living
- Helping people get the healthcare services they need
- Maintaining the staff and other resources necessary to conduct these public health responsibilities

There are 12 standard areas, each with a varying number of measures for local health jurisdictions and for the state level agency:

1. Community Health Assessment
2. Communication to the Public and Key Stakeholders
3. Community Involvement
4. Monitoring and Reporting Health Threats
5. Emergency Response Planning
6. Prevention and Education
7. Increasing Access to Critical Health Services
8. Program Planning and Evaluation
9. Fiscal and Management Systems
10. Human Resource Systems
11. Information Systems
12. Leadership and Governance

Strategic Planning (and related concepts)

See also *Quality Improvement* and *Program Planning and Evaluation*. Generally, *Strategic Planning* and *Quality Improvement* occur at the level of the overall organization, while *Program Planning and Evaluation* are program specific activities that feed into the *Strategic Plan* and into *Quality Improvement*. *Program Evaluation* alone does not equate with *Quality Improvement* unless program evaluation data are used to design program improvements and to measure the results of the improvements as implemented.

The *Strategic Plan* focuses on a range of organizational goals, strategies and objectives including new initiatives, while the *Quality Plan* identifies specific areas of current operational performance for improvement.

Strategic Planning is a disciplined process aimed at producing fundamental decisions and actions that will shape and guide what an organization is, what it does, and why it does what it does. The process of assessing a changing environment to create a vision of the future; determining how the organization fits into the anticipated environment, based on its mission, strengths, and weaknesses; then setting in motion a plan of action to position the organization.

Turnock, B. *Public Health: What It Is and How It Works*, Aspen Publishers, 2001

Vision is a statement of the agency's goals—why it does what it does and what it hopes to achieve.

Multiple sources

Mission is a statement of what the agency does, who it serves, what geographic area it serves.

Multiple sources

Values (and principles) describe how the work is done, what beliefs are held in common as the basis for the work.

Multiple sources

Strategies or strategic goals are broad, long-term [organizational] aims that define a desired result associated with identified strategic issues. [An organizational strategy is often supported by multiple *Objectives*, with specific *Performance Measures*, intended to assist in achievement of the *Strategic Goal*.]

National Public Health Performance Standards, Centers for Disease Control and Prevention, 2004

Priorities merit attention before competing alternatives. [Priority setting occurs in the *Strategic Planning* process when the organization is faced with competing *Strategies* and *Objectives*, and in light of expected resources, must choose which *Strategies* and *Objectives* to pursue.]

Merriam-Webster

Technical Assistance / Consultation

Technical assistance / consultation activities focus on content, methods and tools for program planning, implementation and evaluation, and do not include contract oversight or compliance activities.

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Training/Training Documentation

Training includes formally structured courses (e.g., classroom, conference, electronic) as well as substantive review of pertinent content as part of a regularly scheduled

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meeting (e.g., use of written materials, allocation of no less than one hour of time,).

Training documentation includes evidence of the content of the training activity in sufficient detail to verify that required topic(s) are included (e.g., annotated agendas, course descriptions, and materials such as powerpoints, web-based course content) and documentation of an individual's participation (e.g., meeting attendance roster, class roster, CE tracking logs, certificates of completion).

Appendix A: Excerpt from *Final Report on Access to Critical Health Services*, State Board of Health, 2001 (see definition on page 2)

KEY for “Target Population”: C = Children T = Teens/Adolescents A = Adults (Non-Senior) S = Adults > 65 W = Women M = Men
HR = At High Risk D = Diagnosed GP = General Population

[.....Service Type.....]

Category & Service Item	Target Population	Screening / Testing	Counseling/ Education/ Support	Intervention	Infrastructure	Policy
<i>General Access to Health Services</i>						
Ongoing Primary Care	GP	X	X	X	X	X
Emergency Medical Services & Care	GP	X	X	X	X	X
Consultative Specialty Care	GP; D; HR	X	X	X	X	X
Home Care Services	GP	X	X	X	X	X
Long-Term Care	S; HR	X	X	X	X	X
<i>Health Risk Behaviors</i>						
Tobacco Use	T; HR; GP		X	X		X
Dietary Behaviors	HR; GP		X			
Injury & Violence Prevention (Bike Safety, Motor Vehicle Safety, Firearm Safety, Poison Prevention, Abuse Prevention, etc.)	HR; GP		X	X		X
Physical Activity & Fitness	GP		X	X		
Responsible Sexual Behavior	T; A; HR		X	X		X
<i>Communicable & Infectious Diseases</i>						
Immunizations for Vaccine Preventable Diseases	C; T; S; HR		X	X	X	X
Sexually Transmitted Diseases	T; A; HR	X	X	X	X	
HIV/AIDS	T; A; HR	X	X	X	X	X
Tuberculosis	GP; HR	X	X	X	X	
Other Communicable Diseases (i.e. Meningococcal & Hepatitis C)	GP; HR; D	X	X	X	X	
<i>Pregnancy and Maternal, Infant, & Child Health / Development</i>						
Family Planning	T; W; A	X	X	X		X
Prenatal Care	T; W; HR	X	X	X		
Women, Infants, & Children (Nutritional) Services	C; W; HR		X	X		X

KEY for “Target Population”: C = Children T = Teens/Adolescents A = Adults (Non-Senior) S = Adults > 65 W = Women M = Men
 HR = At High Risk D = Diagnosed GP = General Population

[.....Service Type.....]

Category & Service Item	Target Population	Screening / Testing	Counseling/ Education/ Support	Intervention	Infrastructure	Policy
Newborn & Early Childhood Services	C; HR	X	X	X	X	
Well Child Care	C; T	X	X	X		
<i>Behavioral Health & Mental Health</i>						
Substance Abuse Prevention & Treatment Services	T; A; HR	X	X	X		X
Depression	GP	X	X	X		
Suicide / Crisis Intervention	T; A; HR	X	X	X		
Other Serious Mental Illnesses / Disorders	HR	X	X	X		X
<i>Cancer Services</i>						
Cancer-Specific Screening (i.e. Breast, Cervical, and Colorectal Cancers) & Surveillance	A; S; HR	X	X		X	
Specialty Cancer Treatment	A; S; HR		X	X	X	
<i>Chronic Condition / Disease Management</i>						
Diabetes	C; A; HR	X	X	X		
Asthma	C; A; HR	X	X	X		
Hypertension	C; A; HR	X	X	X		
Cardiovascular Disease	C; A; HR	X	X	X		
Respiratory Disease (other than asthma)	HR		X	X		
Arthritis, Osteoporosis, & Chronic Back Conditions	GP; HR	X	X	X		
Renal Disease	HR; D	X	X	X	X	X
<i>Oral Health</i>						
Dental Care Services	GP	X	X	X		
Water Fluoridation	GP			X	X	X
Services related to <i>Congenital and Injury-Induced Disabilities</i> (specialized therapies and assistive devices) were considered but not included on the adopted menu. Although critical for those individuals affected, such services did not meet the population-based threshold requirement of benefiting the health status of the community-at-large						

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